

INSTRUCTIONS FOR COMPLETING THE ANNUAL IMMUNIZATION REPORT (8018) ON CHILDREN ENROLLED IN CHILD CARE CENTERS

California law requires that all child care centers, day nurseries, nursery schools, and development centers submit the ANNUAL IMMUNIZATION REPORT ON CHILDREN ENROLLED IN CHILD CARE CENTERS (CDPH 8018) every year. Included in the category of child care centers are head start programs. This report includes the immunization status of all children ages 2-4years, 11 months. While the report does not include children who are younger than 2 years, these children must be checked as often as necessary to assure that their immunizations are up-to-date.

First, complete the Worksheet for the Annual Immunization Report on Children Enrolled in Child Care Centers (CDPH 8342) by filling in the following information:

1. Enter name, initials, or I.D. for each child. Enter the date of birth for each child 2-4yrs 11months.
2. Check only the last dose of polio vaccine received. If a child has not received the vaccine, check the zero (0) column.
3. Check only the last dose of DTP/DTaP vaccine received. If a child has not received the vaccine, check the zero (0) column.
4. For measles, mumps and rubella, check the MMR (1+) column only if the vaccine was given on or after the first birthday. If a child has not received the vaccine, check the zero (0) column.
5. For Hib, check the HIB (1+) column only if at least one dose of the vaccine was received. If a child has not received the vaccine, check the zero (0) column.
6. Check only the last dose of hepatitis B vaccine received. If a child has not received the vaccine, check the zero (0) column.
7. Check the varicella (1+) column only if the child has received the vaccine or has physician-documented varicella (chickenpox) disease. If the child has not received the vaccine and does not have physician documentation of the disease, check the zero (0) column.
8. Check the medical exemption column only if the parent has provided a written statement from a licensed physician. Check the personal beliefs exemption column only if the parent has signed a statement of personal beliefs.
9. Check the follow-up needed column only if the child:

has less than 3 polio, 4 DTP/DTaP, 1 each of measles, mumps and rubella (MMR) on or after the first birthday, 1 Hib, 3 hepatitis B, 1 varicella or physician documented varicella (chickenpox) disease), AND does not have a permanent medical exemption to immunization or a personal beliefs exemption.

10. After all children have been listed and the immunization information in each row has been entered, count the number of check marks in each column and enter the total at the bottom of the worksheet. When applicable, please use the subtotal row for centers with an enrollment of more than 25 children.

Second, complete the Annual Immunization Report on Children Enrolled in Child Care Centers(CDPH 8018)

1. Transfer the total numbers from the bottom of the work sheet columns to the corresponding boxes on the vaccine dose summary section of the report.
2. Transfer the total number of medical exemptions and personal beliefs exemptions to the corresponding lines on the exemptions section of the report.
3. Transfer the total number of children who have Follow-up Needed to the corresponding box in the follow-up section of the report. Subtract this number from the TOTAL ENROLLMENT ages 2-4 years, 11 months number and enter the result in the box No Follow-up Needed. Double check that the two boxes summing the Number of Children with Follow-up Needed plus Number of Children with No Follow-up Needed is equal to the TOTAL ENROLLMENT ages 2-4 years, 11 months.

Last, submit the report.

1. Submit the top (yellow) copy to the Immunization Coordinator of your local health department. Retain the pink copy and the worksheet(s) for your records. The worksheet(s) can also remind you which children need further follow-up. These reports must be submitted to your local health department **on or before October 15.**